

215047640
70112

State of Nebraska
Investigator's Motor Vehicle Accident Report

Sheet 1 of 2

2	Total Number of Vehicles	Local No./ District 46	Agency Case No. B5-107241	HIT & RUN? <input type="radio"/> YES <input checked="" type="radio"/> NO	INVESTIGATION MADE AT SCENE? <input checked="" type="radio"/> YES <input type="radio"/> NO	L 1
A/1	DATE OF ACCIDENT	11/17/2015		(In Military Time) TIME OF ACCIDENT 0759		STATE USE ONLY 11/17/2015
A/2	PLACE OF ACCIDENT	COUNTY Lancaster	CITY Lincoln	POLICE NOTIFIED 0801	PRIVATE PROPERTY? <input type="radio"/> YES <input checked="" type="radio"/> NO	
B	ROAD ON WHICH ACCIDENT OCCURRED	STREET/ HIGHWAY NO. N. cotner		ONE-WAY STREET? <input type="radio"/> YES <input checked="" type="radio"/> NO	LATITUDE	
C	DISTANCE FROM MILEPOST	FEET	N S E W OF MILEPOST	HIGHWAY NO.	LONGITUDE	
D	IF AT INTERSECTION		IF NOT AT INTERSECTION			
2	NAME OF INTERSECTING ROADWAY		<input checked="" type="radio"/> FEET <input type="radio"/> MILES		N S E W	OF NEAREST STREET, BRIDGE, RAILROAD CROSSING
V1/M	60.00		X		Starr St.	
V2/M	IF ACCIDENT WAS OUTSIDE CITY LIMITS, INDICATE DISTANCE FROM NEAREST TOWN					
01	MILES		N S E W	AND MILES		N S E W
E	R. WORK ZONE CODES	R1 R2 R3 R4	S. PEDESTRIAN CLASSIFICATION CODES		S1 S2 S3 S4 S5-a S5-b S6-a S6-b	DOES ACCIDENT INVOLVE DAMAGE TO STATE DEPT. OF ROADS' PROPERTY? <input type="radio"/> YES <input checked="" type="radio"/> NO
2	VEHICLE NO. 1					
F	DRIVER LICENSE NO.	H12948477		STATE (Of License)	NE	SEX <input checked="" type="radio"/> FEMALE <input type="radio"/> MALE
V1/N	DRIVER	KRISTIN L GOLDSBERRY		PHONE	(402)730-5180	
V2/N	DRIVER ADDRESS	CITY, STATE, ZIP		DATE OF BIRTH (MM / DD / YYYY)	05/19/1987	
2	OWNER	KRISTIN L GOLDSBERRY		PHONE	(402)730-5180	
G	OWNER ADDRESS	CITY, STATE, ZIP		CITATION <input checked="" type="radio"/> YES <input type="radio"/> NO	CITATION NO. LB485697	
3	LICENSE PLATE PA NO.	SEL167		YEAR (Plate Expires)	2016	STATE (Of Plate) NE
H	VEHICLE	2005	Pontiac	MODEL	GRAND PRIX	4 door Sedan
V1/O	VEHICLE ID NO. (VIN)	2G2WS522751157654		COLOR	silver / chrome	
V2/O	TOWED TO	TOWED BY		ESTIMATED DAMAGE <input type="radio"/> TOALED \$ 2000	INSURANCE COMPANY Progressive Northern Ins. Co.	
1	POLICY NO.		900364370			
I	VEHICLE NO. 2					
1	DRIVER LICENSE NO.	G02095029		STATE (Of License)	NE	SEX <input checked="" type="radio"/> FEMALE <input type="radio"/> MALE
V1/P	DRIVER	CYNTHIA A HOUSER		PHONE	(402)327-4122	
V2/P	DRIVER ADDRESS	CITY, STATE, ZIP		DATE OF BIRTH (MM / DD / YYYY)	09/04/1959	
1	OWNER	CYNTHIA A HOUSER		PHONE	(402)327-4122	
J	OWNER ADDRESS	CITY, STATE, ZIP		CITATION <input type="radio"/> YES <input checked="" type="radio"/> NO	CITATION NO.	
01	LICENSE PLATE PA NO.	STB129		YEAR (Plate Expires)	2016	STATE (Of Plate) NE
V1/Q	VEHICLE	2002	Chevrolet	MODEL	IMPALA	4 door Sedan
V2/Q	VEHICLE ID NO. (VIN)	2G1WH55K329276877		COLOR	tan	
K	TOWED TO	TOWED BY		ESTIMATED DAMAGE <input type="radio"/> TOALED \$ 500	INSURANCE COMPANY State Farm	
01	POLICY NO.		180 9703-D14-27L			
Complete this section for all injured persons (Complete a continuation report, if more than three were injured)				DATE OF BIRTH (MM / DD / YYYY)	1 2 3 4 5	SEX M F
VEH. #	NAME	ADDRESS		Seat Position	Eject	Body Region
	LOCAL NO.	MEDICAL FACILITY NAME		Injury Sev.	Trans.	
VEH. #	NAME	ADDRESS		EMS SERVICE NAME	EMS RUN REPORT NO.	
	LOCAL NO.	MEDICAL FACILITY NAME		EMS SERVICE NAME	EMS RUN REPORT NO.	
VEH. #	NAME	ADDRESS		EMS SERVICE NAME	EMS RUN REPORT NO.	
	LOCAL NO.	MEDICAL FACILITY NAME		EMS SERVICE NAME	EMS RUN REPORT NO.	

THE FOLLOWING INFORMATION IS REQUIRED FOR ALL ACCIDENTS

INDICATE BY DIAGRAM WHAT HAPPENED

AGENCY CASE NO.
B5-107241

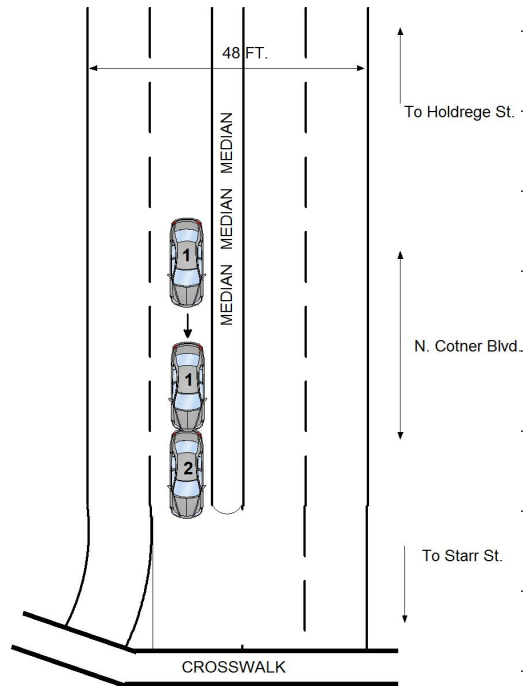


Indicate
North
by Arrow



Not To Scale

APOI= 60 ft. N of N of STARR St.
15 ft E of W of N. COTNER BLVD.



DESCRIPTION OF ACCIDENT BASED ON OFFICER'S INVESTIGATION

Vehicle 1 southbound on N. Cotner from Holdrege St. in the inside lane was in collision with Vehicle 2 that was stopped on N. Cotner at Starr St. The driver of V1 said she was stopped behind V2 for a red traffic signal at Starr St. D1 said the signal for southbound traffic turned green and she saw the brake lights on V2 go dark so she thought that V2 was starting to move so she began moving and struck the rear of V2. The driver of V2 said she was stopped for the red traffic signal behind 1-2 other unknown vehicles when the signal for southbound traffic turned green. D2 said that she was still stationary, waiting for the vehicles in front of her to move, when she was struck from behind by V1.

PROPERTY	OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE \$
	OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE \$
WITNESSES	NAME	ADDRESS			PHONE
	NAME	ADDRESS			PHONE

VEHICLE MOVEMENT BEFORE COLLISION				POINT OF IMPACT AND MOST DAMAGED AREA				AIRBAG DEPLOYED VEHICLE 1		RESTRAINT USE VEHICLE 1		TOTAL OCCUPANTS																																																				
VEH NO.	N	S	E	W	ROAD OR HIGHWAY NAME																																																											
1		X			N. Cotner Blvd.				<table border="1"> <tr><td>-</td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td>5</td><td></td></tr> <tr><td></td><td>4</td><td></td><td></td></tr> </table>		-						5			4			<table border="1"> <tr><td>-</td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td>5</td><td></td></tr> <tr><td></td><td>1</td><td></td><td></td></tr> </table>		-						5			1			<table border="1"> <tr><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td></tr> </table>														<table border="1"> <tr><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td></tr> </table>													
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1	01	06 Turning left			VEHICLE 1		VEHICLE 2		1 Deployed - front		1 None used - vehicle occupant		<table border="1"> <tr><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td></tr> </table>																																																			
2	11	08 Entering traffic lane			POINT OF IMPACT	01	POINT OF IMPACT	05	2 Deployed - side		2 Lap & shoulder belt used		<table border="1"> <tr><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td></tr> </table>																																																			
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